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I hereby certify that the attached RCE Transmittal with accompanying amendment is being transmitted by facsimile to Examiner Debra F. Charles at the Patent and Trademark Office (Facsimile No. (571) 273-8300) on the date shown below. (Total pages transmitted is 21 -including this one).

Date: March 20, 2006


Jennifer AbernathyPATENT APPLICATION
Attorney's Do. No. 6016-003**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Inventors: Dale E. Steele and Kenneth Alan Silva Confirmation No. 8997
Serial No. 09/995,298 Examiner: Debra F. Charles
Filed: November 27, 2001 Group Art Unit: 3624
For: ANONYMOUS TRANSACTION SYSTEM

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

MAIL STOP RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application.

1. Submission required under 37 C.F.R. § 1.114a. ☐ Previously submitted:☐ Consider the amendment(s) reply under 37 C.F.R. § 1.116 previously filed on _____.☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____.☐ Other:b. ☒ Enclosed is:☒ Amendment/Reply☐ Affidavit(s)/Declaration(s)☐ Information Disclosure Statement (IDS)

03/21/2006 TL0111 00000028 09995298

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2. Miscellaneous

☐ Suspension of action on the above-identified application is requested under 37 C.F.R. § 1.103(e) for a period of _____ months. (Period of suspension shall not exceed 3 months; fee under 37 C.F.R. § 1.17(i) required).

☐ Other:

3. Fees: (Note: The RCE fee under 37 C.F.R. §1.17(e) is required by 37 C.F.R. §1.114 when the RCE is filed)

☒ RCE fee required under 37 C.F.R. § 1.17(e)

☒ \$395 small entity
☐ \$790 large entity

CLAIMS AS AMENDED					
For:	Number After Amendment	Previous Number	Extra	Rate	Additional Fee
Total Claims	30	-58*	0	x \$ 25 =	\$0
Independent Claims	6	-6**	0	x \$100 =	\$0
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0

☒ Extension of time fee (37 C.F.R. §§1.136 and 1.17)

	small entity	large entity
<input type="checkbox"/> Extension of Time - 1 st	<input type="checkbox"/> \$60	<input type="checkbox"/> \$120
<input checked="" type="checkbox"/> Extension of Time - 2 nd	<input checked="" type="checkbox"/> \$225	<input type="checkbox"/> \$450
<input type="checkbox"/> Extension of Time - 3 rd	<input type="checkbox"/> \$510	<input type="checkbox"/> \$1020

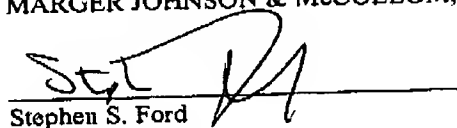
☒ PTO Form 2038 authorizing credit card payment in the amount of \$620.00 (\$395 RCE filing fee; \$225 for 2 month extension of time).

☒ Any deficiency or overpayment should be charged or credited to deposit account number 13-1703.

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Respectfully submitted,

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